

Patricia Booker

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|--|---|------------------|---|------------|------------------|--|---|--|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | Application or Docket Number 101565821 | | |
| CLAIMS AS FILED - PART I | | | | | | <small>SMALL ENTITY TYPE</small> <input checked="" type="checkbox"/> OR <small>OTHER THAN SMALL ENTITY</small> | | |
| <small>(Column 1)</small> | | | <small>(Column 2)</small> | | | <small>RATE</small> <small>FEES</small> | | |
| U.S. NATIONAL STAGE FEES | | | | | | BASIC FEE 150 | | |
| BASIC FEE | | | | | | OR BASIC FEE | | |
| EXAMINATION FEE | | | | | | EXAM. FEE 100 | | |
| SEARCH FEE | | | | | | SEARCH FEE 200 | | |
| FEE FOR EXTRA SPEC. PGS. 177 minus 100 = 77 / 50 = 1.54 | | | | | | X \$ 125 = | | |
| TOTAL CHARGEABLE CLAIMS 81 minus 20 = 61 | | | | | | X \$ 25 = | | |
| INDEPENDENT CLAIMS 2 minus 3 = * | | | | | | X \$ 100 = | | |
| MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/> | | | | | | + \$ 180 = | | |
| <small>* If the difference in column 1 is less than zero, enter "0" in column 2</small> | | | | | | <small>TOTAL</small> <small>TOTAL</small> | | |
| CLAIMS AS AMENDED - PART II | | | | | | <small>SMALL ENTITY</small> <small>OR</small> <small>OTHER THAN SMALL ENTITY</small> | | |
| <small>(Column 1)</small> | | | <small>(Column 2)</small> | | | <small>RATE</small> <small>ADDITIONAL FEE</small> | | |
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | | <small>RATE</small> <small>ADDITIONAL FEE</small> | |
| | Total * | | Minus ** | | = *** | | X \$ 25 = | |
| Independent * | | Minus *** | | = * | | X \$ 100 = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | | + \$ 180 = | | |
| | | | | | | <small>TOTAL ADDIT. FFF</small> <small>TOTAL ADDIT. FFF</small> | | |
| <small>(Column 1)</small> | | | <small>(Column 2)</small> | | | <small>RATE</small> <small>ADDITIONAL FEE</small> | | |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | | <small>RATE</small> <small>ADDITIONAL FEE</small> | |
| | Total * | | Minus ** | | = *** | | X \$ 25 = | |
| Independent * | | Minus *** | | = * | | X \$ 100 = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | | + \$ 180 = | | |
| | | | | | | <small>TOTAL ADDIT. FFF</small> <small>TOTAL ADDIT. FFF</small> | | |
| <small>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</small> <small>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".</small> <small>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".</small> The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | |